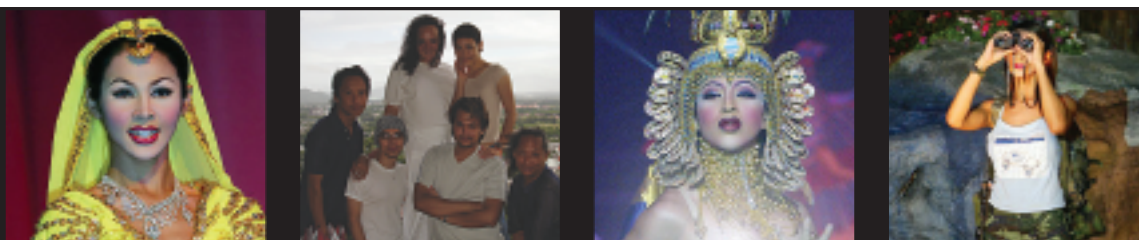




**USAID**  
FROM THE AMERICAN PEOPLE

# KATOEY IN THAILAND: HIV/AIDS AND LIFE OPPORTUNITIES



November 2005

This publication was produced for review by the United States Agency for International Development. It was prepared by Carol Jenkins, Prempreeda Pramoj na Ayutthaya, and Andrew Hunter.

The development and printing of this report were supported by the United States Agency for International Development (USAID) through the POLICY Project.

The POLICY Project is funded by the U.S. Agency for International Development (USAID) under contract No.: HRN-C-00-00-00006-00, beginning July 7, 2000. The project is implemented by the Futures Group International in collaboration with the Centre for Development and Population Activities (CEDPA) and Research Triangle Institute (RTI).

The author's views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.



For more information, please contact:

**POLICY Project**  
**c/o Futures Group**  
**One Thomas Circle, NW, Suite 200**  
**Washington DC, 20005, USA**  
**Tel: (202) 775-9680**  
**Fax: (202) 775-9694**  
**Email: [policyinfo@futuresgroup.com](mailto:policyinfo@futuresgroup.com)**  
**Website: <http://www.policyproject.com>**

# KATOEY IN THAILAND: HIV/AIDS AND LIFE OPPORTUNITIES



CAROL JENKINS, PREMPREEDA PRAMOJ NA AYUTTHAYA, AND ANDREW HUNTER

POLICY PROJECT

NOVEMBER 2005

## ACKNOWLEDGMENTS

The authors wish to express their gratitude to our interviewers, translators, guides (listed below) and all the katoey willing to share their life stories with us.

- We especially want to thank Chutchai ‘Dale’ Kongmont who helped us every step along the way.
- Interviewers: Pantanut Kalapun, Sayan ‘Ting’ Sisak, Thapanapong Semsomyart, Suthee Penphum
- Translators: Chommanee ‘Nung’ Suthinak, Puangpana ‘Saay’ Kunnawat, Sansanee ‘Jib’ Jaritngam
- Guides: Ae from Simon Cabaret (Chiang Mai), Aui from Simon and Turk who showed us all around Phuket, Paeng (Pattaya), and special help and information from Ann Freeman (Bangkok).

# TABLE OF CONTENTS

INTRODUCTION .....	5
AIMS AND METHODS.....	7
RESULTS.....	8
Sample Characteristics.....	8
Family life.....	9
Child sexual abuse .....	10
School life.....	10
Feminization .....	11
Employment.....	12
Citizenship issues .....	13
Military issues.....	14
General medical treatment.....	15
Violence.....	15
Drug use.....	16
Sex work.....	17
Husbands.....	19
Lovers and boyfriends.....	20
Condom use, testing, and STI/HIV/AIDS.....	21
Needs and self-determination.....	24
DISCUSSION AND RECOMMENDATIONS .....	25
Policy Issues.....	25
Employment.....	25
Rape and violence.....	26
Gender and officialdom.....	26
HIV/STI issues .....	27
Evidence, Organization, and Advocacy .....	27
Recommendations .....	28
REFERENCES.....	29

# ABBREVIATIONS

AAAS	American Association for the Advancement of Science
AIDS	acquired immune deficiency syndrome
aka	also known as
ATS	amphetamine-type substance
CDC	Centers for Disease Control and Prevention
HIV	human immunodeficiency virus
ID	identification
MDMA	3,4-methylenedioxymethamphetamine (ecstasy)
MSM	men who have sex with men
NASP	National AIDS/STD Programme
NGO	nongovernmental organization
PI	Principal Investigator
STI	sexually transmitted infection
TB	tuberculosis
VD	venereal disease

# INTRODUCTION

**T**his qualitative study was conducted to document the conditions under which katoey in Thailand are able to access prevention and treatment services for HIV (human immunodeficiency virus), AIDS (acquired immune deficiency syndrome), and STIs (sexually transmitted infections). Recognizing that HIV often spreads at greater rates among the most marginalized and disadvantaged subpopulations in a society, and that katoey in Thailand have rarely been the target of specific HIV prevention programs, the aim of this study was to explore through qualitative research how different katoey in different occupations and areas of the country cope with the threat of HIV/AIDS.

The term katoey (or kratoy) has traditionally been used to refer to a third gender category, known in English as “lady boy” and in Thai as “sao praphet song” or “second type of woman” and other terms with similar meanings. It appears that all recognized homosexually active males were once called katoey and had a variety of roles in different sectors of society, including spirit mediums in the north (Matzner, 2002a). Over the last two decades, however, Thailand has seen the introduction and evolution of other identity terms for homosexually active males focused on gay identity and behavioral roles, such as “gay queen” and “gay king” (Jackson, 1996; Murray, 1999). Middle-class and urban life styles have become more associated with gay identity than with katoey identity. The public face of the katoey has shifted toward greater transgenderism and transsexualism, particularly as Thailand has a well-developed medical establishment ready to perform various forms of surgery to feminize the body. While these identity distinctions have at times led to discrimination against katoey by gays, gradual co-existence in certain venues and jobs is leading to greater chances for affiliation. In this study, the identity

of katoey is self-defined and reveals a wide range of gender presentations as well as a crossover in self-identification (i.e., calling oneself both katoey and gay).

Most discussions of HIV risk and required policy and programs begin with a review of the epidemiology of HIV and/or STIs among the population of interest. It is stunning how little HIV epidemiology has ever been carried out among katoey in Thailand. In most countries of the region, where there are comparative data separating the transgender from other men who have

**In most countries of the region, where there are comparative data... the transgender group has the highest prevalence of HIV**

sex with men (MSM) and/or male sex workers, the transgender group has the highest prevalence of HIV, as in Cambodia, Indonesia, and Bangladesh (Girault et al., 2004; Pisani et al., 2004; National AIDS/STD Programme 2004). The only available study for Thailand is that conducted in Chiang Mai by Fritz van Griensven of the Thailand Ministry of Public Health–U.S. CDC Collaboration. This study revealed 11.4 percent HIV prevalence among male sex workers, 15.3 percent among other MSM, and 17.6 percent among transgendered males as of early 2005 (van Griensven, 2005). Yet, recent reviews of HIV epidemiology and sexual health promotion in Thailand do not mention MSM at all, let alone transgendered MSM (Chandeying, 2004 and 2005). Repeatedly in the Thai literature, epidemiological data include direct and indirect female sex workers and male sex workers only, reflecting the way the earlier surveillance system was set up. In a list of sero-surveys conducted in Thailand compiled by the U.S. Census Bureau's

HIV database, comprising over 1,200 surveys of female sex workers and 20 of groups designated as gay men, homosexual men or male sex workers, none was ever conducted of katoey. Nor are we aware of any properly sampled quantitative behavioral surveys of katoey. In the service sector, STI clinics for male sex workers were developed in a few cities, but the larger range of health needs for non-sex working MSM and katoey have, until very recently, received little attention.

The policy environment in relation to sexual minorities in any country has considerable influence on the degree of vulnerability to HIV, mediated through such factors as educational and occupational opportunities, access to preventive and treatment services for STIs and HIV, access to general medical services, legal rights, police surveillance, and various forms of social exclusion. Further difficulties are associated with policies affecting a host of legal documents that convey rights and benefits, from birth certificates to passports and drivers' licenses. These require the declaration of one gender or the other, which may be impossible for some people. Any legal processes where pictures and identification (ID) card names do not seem to match, such as electoral forms, produce serious barriers for transgendered people.

According to the American Association for the Advancement of Science (AAAS, 2005), at birth, 1 in 4,000–5,000 babies can be classified as gender-ambiguous due to intersex conditions affecting the genitalia. Further, researchers working with mice have identified 54 genes that are differentially expressed in the brains of male and female embryonic mice just 10 days after conception, prior to hormonal exposure. It was long thought that gonadal hormones influence brain differences by sex, but it is now likely that portions of our brains are hard-wired to be male or female very early in prenatal life, and the result may not be congruent with the later development of genitalia. In countries such as the United States, where surgical intervention is done soon after birth for genital ambiguities, the latest recommendations are not to do so, but to wait until the child is ready to make his/her own choice, as the brain has a strong influence on gender development that is not hormonal in origin.

Thus, it is probable, though not yet fully proven, that prenatal influences on behavior, including gender and sexual preference, are mediated through the brain's development. Of course, whatever we are at birth is then mediated once again by our cultures, which define where the cut-offs are for gender descriptions, and these prescriptions may override the biological influences through various types of socialization. Although the scientific evidence for the development of gender and sexuality is not yet able to give definitive answers, it is likely that we will find that the polar interpretation of male vs. female is inadequate to describe the true range of gender and sexual expression in all human societies. Such evidence has implications for laws, medicine, psychiatry, and other fields in the future.

In Thailand, the public knows the image of the transsexual, post-operative katoey whose body form is female and whose glamorous presentation attracts tourists and other delighted observers at pageants, cabarets, on TV, and in movies. The real range of self-expression among katoey, however, is not widely recognized. Beyond just physical self-expression, Winter and Udomsak (2002) have shown evidence in a study of 204 katoey that, despite holding a stereotypically female ideal self-concept, katoey aspire toward a broad range of traits that are less stereotyped and commonly disown stereotypical female traits in their actual self-concept. Socially defined gender roles and traits rarely encompass the true variability found in any human population. These disparities in the context of contemporary Thailand greatly influence the life trajectories of katoey and condition their vulnerability to HIV.

While scientifically informed discussions of gender and sexuality are increasingly necessary to inform legal and policy changes, these will not automatically alter social conditions, which are far more influenced by longstanding social beliefs and concepts. The results of this study clearly illustrate how these social factors produce various types of discrimination and disadvantages for the katoey of Thailand, leading to the narrowing of life opportunities mainly to the entertainment and sex industries and inadequate access to services available to other citizens.



# AIMS AND METHODS

The purpose of the study was to examine the factors that constrain katoey from accessing HIV-related services and that place them at risk of acquiring an HIV infection. We requested different MSM programs in Bangkok to select the best katoey in their networks for the task of interviewer. After acquiring 4 interviewers and several translators, we conducted 3 days of training during which we all agreed on the questions to be asked. These included the following topics:

- Age
- Level of schooling
- Home area
- Religion
- Ever married to woman
- Parental acceptance and family life
- School experience (primary through tertiary) with student, with teachers
- Work experience (applying for jobs, treatment at work, enjoyment of work)
- Drug and alcohol use (past and present)
- Feminization (hormones, surgery, piercing, tattooing, injecting hormones or silicone or collagen)
- Military experience
- ID card experience
- Interactions with police
- Experience with doctors, nurses; general health, sexual health
- Current work, income, living arrangements
- Sexual relationships (sex work, boyfriends or lovers, casual sex, long-term boyfriends)
- Condom use, HIV testing in these different relationships
- Other concerns regarding stigma and discrimination, barriers to opportunities and services

In an attempt to examine regional differences, the sites were selected as Chiang Mai, Pattaya, Phuket, and Bangkok. A total of 20 interviews were to be collected at each site. The range of

persons in each site was to include, if possible, katoey who were working as sex workers and those who were not; elder katoey and younger, even adolescent katoey; Muslim as well as Buddhist, and other ethnic groups besides Thai.

Katoey were recruited through personal networks of local contacts, through nongovernmental organizations (NGOs), universities, cabarets, clubs, and on the street. All were informed what the study was concerned with and (if willing to return to a private room for the interview) were read a statement (which was taped) assuring them of confidentiality, and the freedom to stop at any time or skip a question if they felt uncomfortable. No one refused to be interviewed. All interviews were taped on a digital recorder and conducted in private rooms. Interviewees were recompensed with 500 baht (USD 1 @ 41.06 Thai baht in November 2005) upon completion. All interviews were then translated into English.

In addition, two field supervisors were assigned to acquire interviews with key informants, such as medical doctors who served katoey, lawyers or human rights experts who knew the issues surrounding katoey legal status, HIV project managers that reached out to katoey, bar owners where katoey worked, and media persons who covered their issues.

The interviews were translated from Thai to English by a small team of translators, and checked by the co-Principal Investigator (PI). These were collated and then coded for specific items. These codes are used to calculate the percentage experiencing different conditions. As a qualitative study with a simple convenience sample, none of these proportions can be interpreted to be representative of all katoey in the country; they are calculated simply to examine whether certain responses were common or relatively rare in our sample.

# RESULTS

## SAMPLE CHARACTERISTICS

The resulting sample included 80 katoey interviews and 6 key informant interviews with Kittinun Thamarat (also known as "Danny the Beach"), a pub owner; Niyana Suphapung, Member of the National Committee of Human Rights; Dr. Pimpawan Boonmongkhon, Director of the Southeast Asian Consortium on Genders, Sexualities and Sexual Health; Tomorn SuKhaprecha, editor of GM Magazine; Surang Janyam, director of SWING (an NGO working with male sex workers); and Dr. Angkana Charoenwatanachokchai, Director of the Dermatology and VD (Venereal Disease) Division, Bangrak Hospital.

### **Mothers were more often accepting... and some told their sons they knew they were katoey long before the boy himself did.**

The sample of katoey included persons between 14 and 40 years old, with a mean age of 26. Only one out of the 80 had no education; 21 percent had reached 9th grade and 31 percent had 13 or more years of education. Only one katoey was married to a woman (4 times). Though their work histories were often complex, 15 percent worked exclusively as sex workers at the time of the study; 50 percent sold sex in addition to working at other jobs. These jobs were mostly at cabarets, clubs, and bars, but some worked at beauty parlors, restaurants, and a printing company, and sold perfume; one was a factory manager. Several worked at more than one job simultaneously, often owning a small business on the side. Several were attending

school as well as working, and one was a student only. The mean monthly income for non-sex worker katoey was 11,028 baht and for those who sold sex, 12,860 baht.

## FAMILY LIFE

The study participants' life histories differ somewhat in terms of whether they were born and raised among rural farmers or had been in an urban home. Most, but not all, stated they knew they were more interested in female than male roles when very young (between the ages of 3 and 7 years). Some began cross-dressing as a small child, stealing clothes from a female relative and hiding. Sometimes female relatives, such as aunts and grandmothers, enjoyed dressing the boy as a girl but gave mixed signals about the acceptability of such cross-dressing. Generally, early signs of femininity, such as wanting to wear long hair, were strongly discouraged by most parents while the child was young.

Many stated their fathers were always drunk or paid little attention to them, and quite a few were transferred from one family member's home to another as their parents' worked elsewhere or the marriage broke up. A few families had more than one katoey son. Most katoey stated that their fathers could not accept them as katoey and some said their fathers were fairly violent and rejecting, beat them often, kicked them out, and refused to pay school fees. Others forced their very young sons (of age 8 or 9) to practice Thai boxing and other athletics, even going so far as to have a spy at school to monitor if their son was playing with girls. In more urban areas, several parents went to psychiatrists or others in the medical profession to seek help. However, 38 percent said their fathers did accept them, often after a period of adjustment to the fact that their sons would not marry or

have children. Ironically, even fathers who beat their katoey sons were proud of them later when they won beauty contests.

*I was spoiled by my father when I was little, but when I grew up and started to express myself, my father couldn't handle it. (23 years old)*

*I fixed my eyebrows when I was in the 2nd year of vocational school and had a quarrel with my dad. When he got mad, no one in my family could stand him. One day, I was going to work. My dad was drunk and hit me because I had on make up and a dress. He called me katoey to hurt me. I told him he should go to bed; he didn't listen to me and tried to hold my motorcycle. My mom prepared to drive to my grandmother's house. She knew alcohol made my dad crazy. He hit me real hard. She hit him back harder and harder [until] he fainted. I got off to work and called him in the morning to say that I wouldn't stay there anymore; I didn't want to see my dad again in my life. I moved out to stay in the dormitory. After one month in the dormitory, I wanted to go home. I missed my mom. My dad had quit drinking. He was afraid to lose me. He smiled at me, but I didn't speak to him. My family is now warmer. But I would never go back to live in that house again. (20 years old)*

*My dad always teaches me that, being a woman, I should behave properly in a womanly way, so that no one can blame me. Now I only have my breasts implanted, but I'm collecting money for that other part. My dad also supports me to do that. He knows I want to be a woman, so he doesn't want me to feel less than others. He supports me in every way to fulfill my wish. He said that if I don't have enough money for the operation, he will help me. He's proud of me and always introduces me to others as his daughter. He doesn't call me son. He's proud of me when the others say that I'm beautiful. (24 years old)*

*My dad could accept it more as I grew up. Wherever we go he would say that I'm his*

*daughter. When we went to the army draft, he stood there to protect me from the men who tried to harass me by touching my breasts. (25 years old)*

Mothers were more often accepting (58%)<sup>1</sup> and some told their sons they knew they were katoey long before the boy himself did. Mothers seemed to be most concerned that their katoey child remained safe, completed school, got a good job, did not use drugs, and was a good person. Mothers also wished that their katoey children did not work in clubs. Family acceptance increased when they became older and began sending money home. Many working katoey reported sending money to their mothers on a regular basis.

Family support, at least from one parent or close relative, has great significance for katoey when they face the harsh realities of social discrimination.

*My father passed away when I was at 7 years old, and after that, we moved to Udon Thani province. My mother and I love each other. (35 years old)*

*When my brother was young, he always hit me. Anyway, when he grew up, he didn't do that. My mother told my brother not to hit me. First, it seemed that my mother couldn't accept, but later, she could. She was afraid that our relatives would blame her about letting me be katoey. She said no matter what I wanted to be, I would always be her child. (31 years old)*

*If you ask who has been my greatest support, I must say it has been my grandmother. I asked her if she still loves me given the way I am. She answered that she would love me even I had no arms or legs. It would never mean that I'm not her granddaughter. I started to cry. (21 years old)*

## CHILD SEXUAL ABUSE

There is no single definition of the term “child sexual abuse” but the central notion is that the child is forced or persuaded by someone who is

1. Another study of 165 katoey (Winter, 2002a) showed that 40% of fathers and 66% of mothers were accepting and encouraging of their sons to transition to katoey after the boy discussed his desires with his parents, usually around the age of 12–13.

dominant (i.e., an adult or an older child). The literature on child sexual abuse states that it is common in all societies, very often involves relatives, is kept hidden, especially among boys, and has a variety of negative effects. Some of these are more likely to appear later than immediately, such as a tendency to experience more sexual abuse and rape, even if, as shown below, the child reports later (as an adult) that he enjoyed it. Presumably, the early loss of agency in sexual

**By middle school, the manner in which the katoey was treated became very dependent on the way he dressed; the more feminine, the more often he was teased by other students...**

behaviors leaves such children without the personal resources to resist future coercive sexual situations. In the cases uncovered in our sample, neither outrage nor anger was expressed, despite having been hurt. Education about child sexual abuse has not begun in Thai schools and it is remarkable how little attention is paid to the difference between consensual and non-consensual sex in most sex education curricula.

*My first sexual experience was back when I was 5. It was my uncle. I loved to be with him, sleep in his bed. One day I saw he jacked off. I wonder what he was doing. He took my mouth to suck and slipped his dick in, [and] then he ejaculated in my mouth. I was surprised and liked it, then got addicted to it. I did it for him everyday. I started to know about sex but never had sexual intercourse until I was in 7th grade when my friends assaulted me. My boy classmates chased the girls out and f\*\*\*\*\*d me, six of them had sex with me at lunch. After being f\*\*\*\*\*d, I really liked it. I had sexual desire every day. I had to release my feeling by going to the 9th graders or 12th graders. Then the school began to remit the punishment. They said it is a school, not a pub; you cannot have sex here. (26 years old)*

*First time I learned about sex was from my uncle. He taught me to masturbate. I was in 7th grade. He said it is normal to do. He made me suck his dick. I sucked and sucked [until] he came. I spit it out. He asked me to*

*do it every two days. Then he put his penis in my ass. It hurt, but my uncle said it was all right. We didn't use a condom, used Johnson cream. I was hurt. My uncle said it was ok. But he never gave me a blow job. I thought I was a girl but I didn't know what could go bad about it. (37 years old)*

Further into the interview, this person stated he had never been forced into sex. He also reported that he had acquired an HIV infection later in life.

## SCHOOL LIFE

At primary school many katoey hung out with girls and were teased by the other boys and called names, but most seemed to ignore this, partly because they found support among the girls and were generally in a protective family environment.

*When I was in Prathom 5–6, my parents asked me if I wanted to be a boy or a girl. They questioned me gently. I answered them that I wanted to be a girl. After that, they've never said anything again and have accepted me unconditionally. (21 years old)*

By middle school, the manner in which the katoey was treated became very dependent on the way he dressed; the more feminine, the more often he was teased by other students or commented on by teachers. About half of our sample stated they were very good students, polite to teachers, and frequently the head student and the teacher's favorite, and thereby escaped condemnation for their gender difference. Others were rough, skipped school, were often in trouble with both parents and teachers and did not have good memories of their school life. Gender-related violence at school was reported by several respondents, but only in a few cases were these events serious.

*In middle school, my friends started to make fun of me. I didn't like it at all. They were too much sometimes; for example, they tried to take my clothes off and threw my socks onto my face, [and] then afterwards I would always fight back. (35 years old)*



*When I was in Junior High, I went to a boy's school. It had about 25 katoey. They had a katoey club and kept on asking for new members. Some katoey turned back to be a man. People who teased me were not my friends. (26 years old)*

*The teachers all loved me because I obeyed them more than the other boys [did]. Moreover, I also used to be the chief of the classroom. There were 50 children in my class and my friends voted for me. I was also a volleyball player then. All the volleyball players in our team were katoey! We played against the other teams in my district but we lost. The winner team was a team of boys. (26 years old)*

Among those who did not enter or complete tertiary education, most quit school due to arguments with teachers or parents. Usually, when leaving home, either to enter student accommodations or to live independently, efforts to alter body form became intensified, as did the identity of katoey. For many, a preferred educational career was to study Thai classical dance, and those who did were often able to use these skills later in life. Others studied tourism, education, communications, human relations, accounting, business administration, engineering, clinical psychology, and other subjects, but soon found they would not be able to acquire jobs in these areas if they wished to live as katoey. Some quit school because teachers reduced their scores due to their long hair and dress. Quite a few quit studying when they came to understand there would be major barriers in acquiring jobs.

## FEMINIZATION

Concerns around feminization are great for many but not all katoey. By high school and often earlier, even as early as third grade, many katoey started taking contraceptive pills in order to alter their hormone levels and body form. However, this usually entailed a lot of hiding in order not to attract attention at school or at home. Some young katoey stashed skirts and other feminine clothes outside the house. Most waited until they were more independent from their families to have breast implants. Common

practices include injecting hormones once a week or as many times as they could afford, injecting silicone or collagen on the face and nose, and surgical hip enlargement. Not all katoey tried to feminize their bodies and, in our sample, despite many working as showgirls in cabarets, very few had full gender reassignment surgery. One older katoey showgirl was becoming bored with the lifestyle and wanted to have her breast implants removed and be a man again. Feminization through dress, hair style, makeup, and hormone use was common but by no means universal among those calling themselves katoey. The desire to attract male partners (particularly a long-time, intimate partner) with a feminine body and live life as a woman was counter-balanced by the fact that a feminine presentation drastically reduced life opportunities, including jobs and schooling.

Among the Muslim katoey in our sample, families became more accepting as the child grew up and became financially independent, but breast implants had to be approved by their mothers (which one did). None allowed a full sex change operation due to requirements at burial when the body will be seen. It was understood that a body missing any of its parts would not go to Allah.

*I would like to have a sex change operation. If I can collect more money, I'll do that. Once there was a foreigner who loved me because he thought that I was a real woman. He asked me to live with him and to marry him. I would like to be with him too. Anyway, when he knew the truth that I was not a real woman, he ran away because he couldn't accept that. (31 years old)*

*I was injected with Clorogen [a hormone]. The doctor came to Phuket once in a while. The doctor is katoey. My friend told me that she used to be the doctor's assistant. She quit and opened her own business. She would go to the provinces where there are many katoey. From what I saw, they changed gloves and needle for each person. (18 years old)*

*I used to think about having breast implants and nose surgery, but I decided not to dress like a woman because of my family, not because I am afraid. My family certainly couldn't handle it. My mother prohibits me from dressing like a woman. She fears it will give my father a heart attack. (24 years old, Muslim)*

## Dress and mannerisms are often used to reject qualified katoey from acquiring jobs.

For plastic surgical procedures, our respondents went to special hospitals known for their capacity to carry out these operations, and paid around 50,000 baht for breast implants and 80,000 baht for the construction of a neo-vagina. The neo-vaginal plastic surgery is fairly complicated, and one katoey who underwent this surgery reported she had to return for further surgical adjustments several times.

*When I had a breast surgery, I used [the] saltwater bag. I saw one of the doctors inject the silicone for my friend, and then she died. The doctor ran away. So I chose the salted water. I read from the newspaper that the doctor was arrested. He changed a lot of his identity before being arrested. I went to HadYai. A week after a surgery, two of my boobs are not in the same size. Blood stuck there. I have to go for new surgeon. My new surgeon said the blood stuck, I gave him 5,000 more. Years later I don't know why my breast is smaller, just like teenager's boob. I thought it leaked, 'cause it is 6–7 years already. I went to see the doctor to get new boob, but he said it took 20,000 baht. I can't afford it because I didn't have many guests. So I take it off. The doctor said 7,000 baht. When it was taken off, it was dark green. It was leaking because it is salted water, not silicone. (40 years old)*

*Before having my boob job, I found out much information. I went to Pratunum Polyclinic. It is not like a hospital. It is just townhouse clinic but the doctor is very famous. Most of katoey have gone under his knife. The service and equipment are all*

*right. The general hospital has 2 cases per day for breast implants. This clinic has about 10 customers. When I was there, I was after 2 women. We went to the operation room one by one in a row. They don't use an anesthesiologist. The first knife made me feel like I was scratched by sharp nail. (28 years old)*

## EMPLOYMENT

The world of work in Thailand poses greater problems for katoey than does the world of education. Just as a young katoey is beginning to stabilize his gender presentation and identity, he must find work in a competitive job market. Dress and mannerisms are often used to reject qualified katoey from acquiring jobs. All respondents who had reasonable educational qualifications told the same story. They tried for jobs in their field of study, if possible, but were always rejected. Even for jobs requiring little qualification, they were rejected (e.g., at garment factories that restrict hiring to real women). The rigidity of a bipolar gender system tightly associated with role behaviors restricts occupational choice for everyone—males and females as well as katoey.

*When I went to apply for a job in a restaurant in Chiang Mai, they said the position isn't vacant. They already had someone for the position. The next day they changed the classified board quoting that they want to have a female assistant, and in the parenthesis they wrote "real female." That's so funny. (20 years old)*

*I tried to apply for a job at many places. After placing the application at a factory, they refused. They asked me which gender I was. I insisted I am female. They asked I am a man or a woman. At 7–11, they never gave me a reason when they rejected me. (23 years old)*

*Once I applied for job in a hotel, I had one friend who knew the owner of the hotel, but he wanted my friend to tell me that I wouldn't get a job. (30 years old)*

*Sometimes we'd like to work in the field we studied but there is always a restriction that this position is only reserved for men or*

women, and this eliminates our rights. For example, I applied for a programmer position once but they said they already an appropriate person for that position. Anyway, later, they said that they preferred a man. I told them that my ability is not inferior to any man, but they said it's a company policy. (24 years old)

The net effect of extensive job discrimination is that most katoey who cannot accept the repression of self that the mainstream job market demands find themselves pushed into the stereotypical fields of entertainment, fashion, hair-dressing and sex work. Even katoey with Masters' or PhD degrees are rarely permitted to join academia at any level, unless they give up any feminine self-presentation. The same is true in other professional fields, such as medicine and nursing.

*I have a BA [Bachelor of Arts degree] in business administration but never could use it. Once I worked at Tops' Supermarket. There they accept katoey. Katoey like us can have a long hair and can use cosmetics. We can be ourselves there. (21 years old)*

*I studied Accounting Management. It was a private school and my mother had to pay a lot for the fee. After I quit studying, I worked for Hyundai, in an office, selling auto parts, and then came to work in Pattaya. Many katoey have high education but couldn't find any jobs. Working at Hyundai, I was able to dress like a woman. Now I have many jobs and do many things. I work for the cabaret show, the Tiffany, and work in a bar with my cousin. (31 years old)*

*I studied about cooking and hotel management for three years. I finished studying three years ago, but now I only work for the cabaret show. Well, I used to apply for other jobs, but they already had the other for that position. (31 years old)*

*First, we are not like a man or a woman, so we can't honestly be ourselves. Second, we may have a problem when we apply for a job if we have long hair. If they have a choice between the one who has short hair and the one who has long hair, it's sure they will*

*choose the one who has short hair. This is from my friend's experience. One of my friends has three degrees but can't find any job because he has long hair. This forces him to have his hair cut. Anyway, he can't resist the feeling inside that he isn't really a man, so he walks away from that place. This makes katoey discouraged from further studies. They say it is of no use. They can't find a job anyway. (19 years old)*

## **Even katoey with Masters' or PhD degrees are rarely permitted to join academia at any level, unless they give up any feminine self-presentation.**

### **CITIZENSHIP ISSUES**

Experiences differed by region but were usually unremarkable whenever katoey engaged with standard legal requirements of Thai citizens, such as obtaining an identity card or applying for a passport, although sometimes they had to go through extra and embarrassing steps, such as finding a relative who could testify that the documents actually belonged to the female-appearing person in front of the officers.

*I cross-dressed to have my passport picture taken. The officer asked nothing. They were polite. When I applied for my ID card, the officer said the referred person should go to the counter. I said I am the referred person. She asked me about my studies and we made small talk. The officer treated me good. (23 years old)*

*The officers of Pravet District spoke to me politely when I went to have my identification card done. They helped me find the camera angle in which I looked best. (29 years old)*

*They always look at us like we are weird. Once I went to rent an apartment, but they told me their apartment had woman only. They didn't like katoey. I have often been refused from jobs, especially in offices. (24 years old)*

## MILITARY ISSUES

Unless a boy completes 3 years of reserve officer training during high school, the Thai Army regulations require all young men to report for a fitness exam at the age of 20. By then, most katoey have made body changes, usually by developing breasts. Until very recently (Dragoncastle, 2005), the Army considered gays and what they call transvestites to be mentally deficient and marked that on their formal records. In some actual instances, the Army inspectors wrote other explanations for rejection, but usually only when the katoey begged them not to write mentally deficient, as such a designation ruined chances for jobs, passports (in the past), and other opportunities.

**As of August 2005, the Army altered its rules, in existence since 1954, and will no longer place the words “mentally deficient” on a person’s certificate.**

Many katoey completed the National Guard training in order to avoid later Army conscription.

*I was studying in a college for professions in Chiang Mai. There were 3–4 katoey from my school and about a total of 10, including the other schools. We were given privileges when we were trained. When they did ground training, the trainer would allow us to skip it. Instead of training, we gave the trainer a massage. We were privileged; we didn’t have to take the shower with the men. But we didn’t miss looking at the men. The trainer also allowed us to stand and look while the men were having the shower. (36 years old)*

*Yes, the military trainers respected our rights. There were many katoey in the training. One day when I went to the camp, I had oral sex with a teacher. He asked me to do the massage for him in his tent. He said that I was beautiful and he liked me. He asked me to do a blow job. He really liked it. Then we had anal sex. All I can remember is that he was very strong and handsome. I waited for*

*a long time to have sex with him! Lots of students liked him and were teasing him! We didn’t use a condom, just lotion. (31 years old)*

During the conscription process, which (as mentioned above) takes place after many katoey have begun to alter their bodies, usually by using hormones or having breast implants, there were many interesting experiences, and many odd reasons listed for rejection (such as otorrhea and hernia), according to the study respondents. The recording of a judgment of “mentally deficient,” however, was considered the worst.

*They arranged the seats for other katoey and me. Moreover, the doctor treated me very politely. He understood katoey like us. I told him frankly that I’m katoey. I asked him not to write any bad words in my report because that report might have an effect when I applied for a job. He wrote that I had a problem about my eyesight. For other katoey, they usually wrote “mental disorder.” It’s cruel! (24 years old)*

*I passed my military draft. They wrote down on my paper that I have a bad chest shape. (I took birth control pills and then my breasts were big). I asked the doctor not to write down “psychosis.” That word will cause me problems when I want to go abroad. (26 years old)*

*I dressed up like a woman for the military draft. They mocked me for dressing in a skirt, white t-shirt, bra, [and] high-heeled shoes and walking in the military office. The officer [said he] needed me to bring the right person. I insisted that I was the right person. They were all confused. Finally, they separated me out from the male group into another [gay] group. It was time to call me up for the medical check up. I had to take off my clothes. All the soldiers stared at my breasts. They didn’t do anything, but one of the air force officers took me to a seat. He started up a conversation on many topics but eventually to sex related topics. I didn’t think much about this, but I liked him. He was a good-looking man. He finally asked me out*



*for a dinner. Then I said I [would] go with him only for dinner. I gave him my number but there were no calls from him. (23 years old)*

*I got called to a military draft at Sukothai. I dressed as a guy but put on a bra because I have breasts. First, when they asked me to take off my shirt, I was red. The officer said, "Take it off now." Then he asked me why I wore bra. I answered I am not a guy. I could not take off my bra there. He said I have to take it off in the next room for him to see. He asked me how I got my boobs; I said the birth control pill and injection. He touched them and said they were softer than his girlfriend's. He was funny and cozy. His diagnosis was I am third sex, not mentally retarded. That year the military let two katoey become soldiers—doctor's assistants. They are really happy to be in the military. They all smile with long hair and big boobs. (23 years old)*

As of August 2005, the Army altered its rules, in existence since 1954, and will no longer place the words "mentally deficient" on a person's certificate. Despite the old rules, thousands of openly gay men had been accepted as conscripts, but transsexuals were always rejected outright, and the rule change is seen as a move to update the system.

## GENERAL MEDICAL TREATMENT

Seeking general medical treatment was not too problematic, but several negative comments were made repeatedly. These included the observation that government hospitals had long waiting times and had staff that reacted to katoey according to their social status (i.e., if they were well-known performers from a nearby cabaret, they were seen quickly and treated as celebrities, but if they had an accident and were dirty when they arrived at hospital, they were shunned). Most working katoey sought care at private clinics where they were treated more quickly, but even among those with health insurance using private hospitals, nasty experiences were reported.

*I usually go to chemists and clinics, I didn't like the service in the hospital much; they spoke rudely sometimes. And it can be expensive. (40 year old)*

*One day in Pathong, I wore dirty clothes. Their disgust toward me was very outstanding. I bled and hurt from the way they sewed up my wound. There was one nurse who showed her [obvious] disgust with me by swirling her hands away. She was impolite. Pathong hospital was still state-governed. I found this situation very often and sensed they looked down at me because I was poor. They shouted my name out and blamed me that I could not hear them calling. All I could do was to sit still. I was not brave enough to argue as I came there needing them to treat me. But the doctors, they were ok. (22 years old)*

*In case I become seriously ill, I could go to a Bangkok hospital, which is a private hospital. I have insurance. But the nurses there were rude. They acted like I went to beg them for something. I could go to another hospital, but it's also bad. Once, I had a motorbike accident. I was wounded and cried. They told me to be stable [and] try not to move. After that, the nurse yelled at me about getting injured and coming to the hospital. The doctor was nice but the nurse was impolite. She said that I deserved it because I drove fast. Then she cursed me, saying "damn katoey!" (18 years old)*

## VIOLENCE

Transgenders in many countries are subject to considerable violence, including sexual violence. In this study, violence was most often reported in Pattaya (56% of informants), and was mostly perpetrated by police. Violence was reported by 32 percent of respondents in Chiang Mai, 20 percent in Bangkok, and 18 percent in Phuket. In Pattaya, there is a large number of katoey, including many who are poor sex workers, strolling the beach, streets, and club sites looking for clients. Some are also drug users, mostly of yaba (an amphetamine-type substance [ATS]). While some of these may be harassed by police looking for drugs, many are simply

beaten and brought to the police station on charges of prostitution or even trumped-up charges such as cross-dressing, largely to elicit a bribe. Many katoey complain in Pattaya that bad actions (such as theft) carried out by a few katoey have prejudiced the police to think all katoey are troublemakers. Most importantly, when katoey are assaulted, they have no faith that the police would do anything for them. Currently, raped katoey are not entitled to take legal action as they are considered male under the law; they can file only an indecency charge (anacharn in Thai), but not a criminal charge. (Parivudhiphongs, 2005).

#### **VIOLENCE AND HARASSMENT OF SEX WORKERS BY POLICE**

*They threaten me that they will hit me if I don't give them the money. They are bastards. I hate them. My friend was hit on his head by a gun for not giving them the money. Sometimes they curse us like we are dogs.*

*Yes, I have had a problem with the police and I would really like to tell this story to you. They always treat all the lady boys in such a cruel way. It is an assault with intent to get rid of all the lady boys in their region. For example, they hit and kick many of the lady boys for no reason. Since I've been in Pattaya, they hit me already 3 times with their shoes while I was running away from them. They took my clothes off 4 times, and pressed charges [against] me, with fines, for disturbing the foreigners or hanging out on the street at nighttime. Well, I was trying to attract the customer for my income. (35 years old)*

#### **VIOLENCE AND HARASSMENT OF NON-SEX WORKERS BY POLICE**

*After work, it was about 11 at night; my friend walked to the bus stop (in Bangkok). The cop went straight to her. He squeezed her arms, she said she is not a prostitute, [so] let her go. The cop didn't believe [this] and [was] very rude with vulgar language. Then another katoey co-worker went to intercede for her. Our customers also went to declare she is hairdresser, not a sex worker. I want*

*police to notice us as normal people. We work here; they should notice us. When I wait for the bus, I have some fear of the cops. I want to have career card to show we are hairdressers. I want to be carefree in my life. I saw the plainclothes policeman took someone with force to the police station without asking a word. We work here, why can't they remember us? All they think about is fining more people. (22 years old)*

#### **RAPE**

*Yes, once I was raped when I was at 15 years old, at the matthayom level 4 (high school grade 10), by my elder school friends. There were 5 of them, each of them were raping me at the same time. It started when one of them took me to an old ruined house in middle of nowhere; I had trusted him. They forced me and threatened to hurt me if I refused. We had anal sex, and three of them used condoms. No, I didn't go to the police. I didn't think they would care for a lady boy. (22 years old)*

*When I was in Ranong, there was a man coming to find his girlfriend. I went out with him on his motorcycle, but he and his friends hit me. There were 10 of them, two of them hit me, but all of them raped me. I was hurt. I felt like I was a little girl and they raped me. I don't know if they used protection, because I was still conscious. Afterwards, the guy I went out with gave me a ride. He sent me back home. He didn't rape me and he apologized for taking me to his friends. No, I didn't tell the police. How could they have believed that a katoey was raped! (31 years old)*

#### **DRUG USE**

The use of drugs and alcohol was common among all katoey, with the highest levels in Pattaya (63%) and Phuket (56%) and lower levels in Bangkok (45%) and Chiang Mai (40%). Many had spent several years using drugs earlier in life and had given them up, but often a break-up with a long-term boyfriend would send them back on drugs. The most common drugs used were yaba (ATS) and ya-e

(ecstasy-MDMA), various forms of muscle relaxants (benzodiazepine) and sleeping pills, yab (ketamine), and “ice” (methamphetamine). One katoey had been addicted to heroin as an injector for 2 years, but quit after a friend died. Several others had found themselves addicted to yaba and managed to give it up. A few of these katoey had experienced paranoia and suicidal thoughts, but had stopped taking the drug. Most of the yaba users used it for parties and had little sex on the drug. Many clients of sex workers used these drugs and gave them to the katoey. Many discussed how alcohol and certain drugs combined made it difficult to use condoms, but others claimed that no drugs interrupted their condom use. Several katoey had made promises to their parents that they would not use drugs, and this kept them from becoming involved. Nonetheless, those who sold sex more often used drugs (61%) than those who did not sell sex (35%).

*After splitting up with my first guy, I kept sleeping around without a condom, as I was broken at that time. I only did oral sex. At first, I was not scared. But the more often I slept around, the more threatened I felt as my gay senior was infected with HIV. So I got myself a blood test. Nothing happened. At the time I was in a relationship with my second boyfriend, I went to see a doctor for fear that something could happen with me. I never thought about AIDS before. I was really scared when requesting the doctor for HIV check-up. The doctor just asked how many guys I had [been] involved with and how I used the condoms. I honestly told him that I didn't wear a condom [during] the age of 24 to 25. Because of my fear from all TV and publication media increasingly exposing this thing, I decided to stay with my boyfriend. He worked in a company. We had sex everyday. We quit using the condom because we both passed the blood test. We trusted each other. We were together around 8 months but we started having sex less and less. He turned not to like me anymore. He thought he needed a girl. We had some discussions. He said it was not what he wanted. In the future, he would need someone who was a real woman. I burst into tears and admitted we should break up. After that, I*

*was back to the nightlife, drank a lot, smoked, took drugs, and had sex, but rarely. I became a drunk, a heavy smoker, and an amphetamine junkie for seven months. When making love, I used the condom at my convenience and if available. I didn't fear at all, as I felt I was a woman. My heart broke. Using drugs didn't relate to the condom usage, as I didn't want to wear it. Seven months past, I felt very sick like a zombie. Then I started to pamper myself more, go to the temple, and pray with my very dark face in a skeleton shape. So I refreshed up myself and later found another boyfriend and am still with him. (32 years old)*

**As with female sex workers, youth counts and when an elder katoey loses her looks, it is likely that the sex work income drops.**

## SEX WORK

Making a living as a sex worker appears financially advantageous to many katoey with few job prospects. Even after being scared of being forced into it via a trafficker, those without usable educational qualifications soon find they have few other choices. Also, for those who work at venues through which clients can be contacted, the extra money is valuable. Some katoey also purchase sex, often from gay sex workers. Some katoey sex workers say they hope to save money for a sex change operation, but in fact quite a few admit they make money with their penises (i.e. they often are asked to be the inserter). As with female sex workers, youth counts and when an elder katoey loses her looks, it is likely that the sex work income drops. Many sex workers state they want to get out of sex work, if they could save enough money to open a small shop or other business of their own. Farangs (foreigners) pay more than Thais and are the most desired clients, especially if a longer-term arrangement can be made in which the farang sends money between visits to Thailand. Group sex (where several katoey serve a single client) or orgies (where there are numerous men and katoey) are common and often described as “amusing.” Occasionally, katoey also serve women.

*I realized that I was a lady boy since when I was 7 years old. I wanted to wear skirt like the other girls at the school. I quit the school since I was young, because of my confusion, and the financial situations. I left home when I was 13 years old, I went to Bangkok for a job; I made noodle soup on the street. I was so sad for my childhood, mainly because I felt that my family ignored me, and also the confusion of being myself. [respondent*

**If adequate information and encouragement are available, sex workers learn quickly they are at risk of HIV and other STIs and adopt condom use...**

*crying a lot]. I felt aroused by men and felt very weird for myself. I worked very hard at the noodle soup shop around Rachadamnean road at that time; then I met an elder friend whom invited me to work as a prostitute; it was better money. I got about 500 baht each time I went out with the customers. After a year, I felt more comfortable with my job. (40 years old)*

*My friend persuaded me to come to work in Pattaya 6 years ago; I perform at Simon Cabaret. My salary is 6,000 baht. I get tips from [people] taking photos. From [these tips] I could make around 20,000 baht a month in high season and 2,000 baht in low season. After the tsunami, I made 700–800 baht tips a month, but this is not enough for my living. I go out with guests, about 3–4 a week. All foreigners, they give me 1,000–1,500 to 2,000 baht each time. I do oral and anal sex, and always use condoms for anal but not always for oral. If he looks dirty, I'll ask him to wear it, but if he is handsome and I like him, maybe he doesn't have to wear it. I know how to use condom from gay magazines. There are many tips for gays. I love to read that. Sometimes my brother buys the magazine. He likes to read it too because he is gay. (21 years old)*

*Last month I was the penetrator only 2 times out of 9 persons. It depends which month; for example, this month I had 10 customers; I was the one who did the penetration for 6*

*days and the next month, I might not have to do anything. They would give me oral sex. Yet I'm katoey because I would love to be a woman. Sometimes I have to use my penis because I don't have a woman's organ. (25 years old)*

*I got this job straight after I quit school at prathom 6 and have been working here 7 years. I was inspired to come here and work as a prostitute through the media and television programs. I have about 20 clients a month. I use condoms about half the time. They give me 600 to 1,500 baht each. Once I had an Italian boyfriend, and I was taking lots of drugs at the time, he asked me to stop but I didn't. I got annoyed then finished with him. I was taking K [ketamine] or tinner, chopper, cocaine, and yaba. (35 years old)*

*My friend asked me to go to Bangkok with him to a bar. There was an agent that came to deceive us. One of my friends was forced to have sex with guests. When I knew that, I called back home to tell my mother that my friends and I were deceived. We had been sold to a bar in Bangkok and they would like us to be a sex worker. I sneaked out and called my mother to ask for her help. I told her the address of the bar and then she called the police to help us. Then we went back to Udonthani. Later I came to Bangkok again with my friends to look for a job. Then I went to work in a bar on Samet Island as a waitress, but only earned 2,500 baht a month and tips, 100–200 baht a day. Later, I moved to another restaurant. At that time, I had a long hair and started to dress like women. I wore a skirt. After that, I went back home again before coming to work in Pattaya. I perform lip-sync singing in a show, and began going out with guests when I was 16. I earn about 500 baht a night. When I had a foreign boyfriend, he also gave me 15,000 baht a month. I sent some money back to my family—2,000 baht a month. Now I have 2–3 guests per week and use condoms for anal sex, but for oral sex I don't, if the guest doesn't want it. (22 years old)*



If adequate information and encouragement are available, sex workers learn quickly they are at risk of HIV and other STIs and adopt condom use, especially for anal sex. Consistency is more difficult to attain, especially when there is police harassment in the environment, when customers refuse, and when they are building a relationship with a boyfriend. Learning how best to protect oneself is more effective when the information comes from a true peer and is adapted to the real situations that place a person at risk. Without properly designed and targeted HIV prevention programs for katoey, they have had to learn from other sources.

*Yes, I usually carry only two condoms in my pocket because I'm scared of the police. It somehow became a regular rule in Pattaya that if they search lady boys and find many condoms in our pockets, they will just charge 500 baht for each condom straight away, but usually only if there are more than two condoms. (19 years old)*

*I have a lot of friends. Now I stay with my other gay friends. Each of us has our own room. They always bring men home and they exchange gossip with me about customers. My friends always remind me about safe sex. I want to tell every gay to protect himself from AIDS. I have seen many of my friends die from this fatal disease as their drunken mind made them forget to protect themselves. (24 years old)*

*I learned from friends, elder lady boys, and a local hospital. I found a lot of information about how to use a condom from the hospital's leaflet. (19 years old)*

*From discussing with my friends, we shared experiences. They would say like if the customer wanted to pay extra to have intercourse without a condom, don't do it. (18 years old)*

*I learn about AIDS from friends and television. No one ever taught me. (39 years old)*

## HUSBANDS

Most katoey do not start having serious relationships until they are living independently from schools and families. Some relationships are with straight men, while at other times they may fall in love with gay men. Those who are sex workers also have long-term boyfriends, but over the years, many cease trying. The relationship trajectory for transgenders is difficult everywhere. Marriage is rarely an option and straight men usually eventually want a woman. Occasionally a katoey finds someone who wants to marry her. The dream of many is to find a “husband” and live their lives as wives. This seems to occur very seldom, however, and many katoey are quite cynical and sad about their chances at a normal life.

*It had been one month and he told his parents that he had met a girl whom he wanted to get married to. He is a Muslim too, and he knew that I'm katoey, but the people in my neighborhood still couldn't notice. At first, they knew that he was flirting with a woman. In Islam, if two persons want to live together, they have to get married. Traditionally, it's called “Dawan Kanika,” and the other 6–7 people came to my house. I was surprised because it happened to be the day that my mother came back home. They asked my mother how much it would cost for him to get married to me; she said she didn't know because she has only sons. Finally, they knew and they beat us. They said if we wanted to live together we could, but there would be no wedding ceremony.*

*After being together for 4–5 months, his mother asked me why I still took contraception pills, because she wanted to have a grandbaby. Well, my boyfriend told her that I'm not a woman but [rather a] sao prapet song ('lady boy'). She was stunned and asked me if it was true. I answered yes. Anyway, I have to say that his mother was [a] very good person, even better than my mother. While we were living together, she washed my clothes for me, even my underwear. If we didn't have any money, she would let us eat before her. She is an old lady. I love her so much. (25 years old)*

*I'm still afraid of a sex change operation, and my boyfriend doesn't ask me to do that. If he asked, I'll do it for him. My boyfriend loves me from the inside; the physical look is not important. I have never worked the night job. I always go home right after work because my boyfriend is very jealous. He calls me 10 times a day! I meet him twice a week. He stays at Meenburi with his child and his parents. His parents welcome me. My parents were afraid that I will lose my money staying with him [the interviewee owns a beauty salon], but it doesn't turn out to be like that. We were engaged and he took care of the expenses. We are not yet married. I have taken care of my husband's daughter since she was 3 days old because the mother didn't want to take care of her. Now she is 8 months and has started crawling. I wish when she grows up, she will accept me and listen to me. Now I just take good care of her and want her to be happy. When the father is away, she clings to me. Anyway, when her father is home, she clings to him. Sunday is the happiest day because the whole family gets together. I hardly believe this is true, to have a complete and happy family. Sometimes I think this is a dream, because most katoey normally can't find love or get a family.*

*Anyway, I told him if a foreigner asks me to stay with him, I'll go, because it is impossible that we will stay together for a lifetime, but the foreigners, they will be more open. They can accept katoey more than Thai people. He said nothing; he just cried. It would be wonderful to get married, but I have to think twice, because marriage life is not easy, even for man and woman. I would ask him first if he can take care of me. Mostly the ending of all katoey lives is to be fooled by men. All of us third gender, we have strong feelings; hate is hate and love is love. The rule for all katoey is we never know when we will die from AIDS. If we don't die from accident, we will die from disease. (22 years old)*

## LOVERS AND BOYFRIENDS

Both sex workers and non-sex workers have medium-term boyfriends and short-term lovers who are not clients. There were a few katoey who reported a fairly inactive sex life, and some younger ones wanted to remain a virgin until the right person came along. But the majority of relationships formed with these partners can become quite complex, and [apparently] issues around sexual safety can become confusing. Often the boyfriends of katoey working in cabarets and clubs are themselves working in the clubs or bars, are gay, and may have other partners as well.

*My boyfriend is a foreigner. I met him at Simon Cabaret where I worked. He came to see the show, and then we met. After he took me to his place, we liked each other; later we traveled together. We went to Kanchanaburi, Pattaya, and many other places. He's a very nice man. He is 52 years old. My parents are happy; at the moment, my boyfriend's supporting them with some money, about 30 to 40,000 baht a month. He'll come back to Thailand in September. Last time he came in April and went back by May. Next time he will stay for two months. We do all the usual sex and we both take turns. We don't use condoms for oral sex; we use condoms for anal sex. Last time I checked, my blood test was negative. I never wore condoms in the past, until I start dating this foreigner. We have sex almost every day. I use a condom when I penetrate him too. (26 years old)*

*I live with my present boyfriend for 12 years already, since my university year. He gives me freedom as I want. I can go with new people I am fond of. I give him freedom as well. I am his first boyfriend, so he sticks with me. I was happy to have sex with 50 people in my list. I will keep their contact number for 6 months. If they contact me within 6 months, I will have sex with them again. I know the exact number because I write their names down on A4 paper. Now I have one regular partner besides my boyfriend. I know him for 2 years. He is the only one I always have sex with. At the beginning of our relationship, I always wear condoms; now I don't use condom but still have a blood test every 3 to 6*

*months. I trust him. He works hard and never has any risk in his normal life. He has only sex with me. I use condoms with my boyfriend when we first go out together. Later I don't use condom; I trust him and we have sexual freedom. (36 years old)*

*Yes, I have a boyfriend. I think he is gay, but he seems a lot like a man. He only penetrates and he had a girlfriend before. We've been living together for 5–6 months and we work at the same place, but now he ordains as a monk. So we are separated but we are still boyfriend and girlfriend. Anyway, I'm thinking about splitting up with him, because after being alone, I feel better. It's comfortable. I can do anything I want to. When he was here, I had to cook and stay only in the apartment. Now, I can go out after work. (21 years old)*

## CONDOM USE, TESTING, AND STI/HIV/AIDS

Over a third (44 percent) of the katoey in this study who were not sex workers had concurrent partners, as did all sex workers, indicating that among the 80 katoey in the sample, 80 percent had concurrent partners, a significant indicator of risk. The means of acquiring an STI or HIV infection among respondents were queried in a number of ways, and the results show fairly clear behavioral patterns according to type of partner and length of relationship, among other factors. These patterns are likely to be diffused through the community via personal conversations. Doing so makes them seem normative and acceptable, but the degree of real safety in terms of transmission dynamics are not fully understood by most katoey.

*If we have a condom with us all the time, we won't get any guys back to our room. It's a belief of sao praphet song here in Chiang Mai. Anyway, we usually have some condoms kept in our room. (21 years old)*

*About 80 percent of the customers didn't like condoms for oral sex. I charged them extra money for not using condoms for oral sex. Only with few customers, I didn't use condoms for anal sex. I got 2,000 baht extra for each time without a condom. (29 years old)*

*Yes, I always use condoms with the foreigners, but not always with Thai customers. Two weeks ago I had sex with Thai man, and he didn't want to use condom with me, and I trusted him, so I [agreed]; we had an anal sex. I felt a little scared afterward; I went for blood test straight after. (22 years old)*

## Study respondents ... were inconsistent in condom use, especially if the new partner looked clean and was handsome.

*I carry condoms. Most of my customers wear condoms. But my last 4–5 customers did not wear condoms because they did not like [the] feeling. If my partner and I have long-term relationship, I will trust him enough to have sex with him without protection. But if we have known each other for just a short time, I will protect myself by wearing condoms. (19 years old)*

Boyfriend and lover relationships are the most problematic for condom use. Study respondents admitted repeatedly that they were inconsistent in condom use, especially if the new partner looked clean and was handsome. In relationships that continue, condoms are used for a while, but as trust develops, their use is dropped. In a few cases, however, the behavior was reversed and condoms were used later in the relationship rather than earlier, after both partners had been tested for HIV and found to be negative. Many katoey seem to depend on HIV testing to establish that they can trust their boyfriends, and sometimes, of course, they are lied to. Sometimes they don't wish to acknowledge that their lovers have other partners and what that means in terms of condom use.

*I think my boyfriend is seeing someone else; there's always someone calling him over his mobile phone while he's together with me. But I don't care because I love him very much and it is men's nature. We have sex about 15 times within a month. No, we don't use condoms all the time. It depends on whether we have a condom at the time or not. I trust him. (19 years old)*

*Many of my relatives died from AIDS, so my father asks me not to be promiscuous. Even if I promise him, sometimes I cannot keep a promise. I used to make mistakes too. Even if I protect myself, I am not sure if the condom is in a good condition or not. Sometimes when I sleep with a guy, we slip on condoms and start having sex. But during that time, the condoms break and we have to stop. It is true that we have fun but I am still afraid that I will get AIDS. The killer virus may be in my body even now, is my thought. The condoms break many times when I sleep with guys. Sometimes we do not even realize it and we come to realize only after the intercourse ends. Understanding turns to mistrust. (25 years old, Muslim)*

## For STI examinations and HIV testing, adequate [specialized] clinics were not often available...

*I had sex once when I was 13 at a temple fair. I did not have to do anything, since he was in charge. He used his mouth on me, and then I returned the favor. All along I used condoms that the doctors in nearby hospitals gave me. They taught me to use condoms when I had sex, and I found it was very useful. The other reason was because my mother told me to be careful on sex. I love her and believed in what the doctors said. By using condoms, I would be free from disease. When I have a boyfriend, I will make sure it's safe so that I would not have to use condoms. When I have to have sex, I will wear condoms. If my partner does not want to wear it, I sure would not do it for him. If I have a boyfriend, I will make sure he really loves me before he can come inside me without condom. As for drugs, I definitely would not go near it. My parents would not like it. I just want to be a good homosexual. I just look up to good role models so that one day I can be like them. (17 years old)*

For STI examinations and HIV testing, adequate [specialized] clinics were not often available, but were less often offensive than the general clinics. The larger problem reported relates to the 30 baht scheme (national health insurance plan requiring local registration). If a katoey (or anyone else) is not working in the district he/she is registered in, using the 30 baht scheme requires a long and often expensive trip home, as local registration is usually impossible without owning a local home.

*Yes, every three months we must have a blood test at my workplace clinic. The elder employees always were there whenever I'd like to have a consultation. I usually go to the government hospital in Bangkok. The service is good. I felt normal. (23 years old)*

*If I get sick, I will go see the doctor. I am afraid of having an HIV test. First time I heard about AIDS was 8th grade. I had a blood test, but no other health check-up. I have thought of it, but it is expensive. Now I have 30 baht health scheme card at home in the province, but never have a chance to get back home. (26 years old)*

In 1985–86, the Ministry of Health made an effort to serve male sex workers through a clinic in Patpong, but for various reasons it was moved later to Bangrak Hospital. More recently, an effort has been made to set up an MSM clinic that serves men who are not sex workers. There is no specific clinic for transgendered people, whether sex workers or not (a classification that can be very fluid), and it remains unclear from the study interviews if doctors and nurses are specifically trained to manage transgender issues. For example, specific equipment needed for all MSM and katoey (such as proctoscopes) are not on hand at all general STI clinics. Perhaps more importantly, it is unlikely that the full range of sexual and gender-related issues is understood by most medical providers. With greater understanding, the opportunity for counseling when katoey come for STI or HIV testing would make a valuable contribution to prevention. Unfortunately, another by-product of the 30 baht program is to limit the number of patients that can be seen each day (e.g., at the Bangrak MSM clinic, up to 10 in the morning and 10 in



the afternoon). The male sex worker clinic can see more, but many potential patients are not registered to use the 30 baht program in Bangkok. A local NGO has helped by escorting them to the clinic and allowing them to register with the NGO's address. It remains unclear where all the different katoey would feel most comfortable in accessing services. Given that the most feminine (i.e., post-operative transsexuals) feel very uncomfortable going into male toilets (and are often scared of female toilets as well), general clinics may be more suitable than clinics for MSM or other male groups. In any event, the current budget allocations and geographic spread of appropriate services, and their training and equipment, are clearly inadequate to meet the needs of Thailand's katoey.

HIV testing and treatment are largely available in specific general hospitals only. Some NGOs provide these services but are not widely spread throughout the country. This study indicates that many katoey rely on frequent testing and an attempt at negotiating condom use in relationships for their safety. While a minority of katoey reported they were 100-percent consistent users with everyone for both oral and anal sex, the majority tried to figure out if they needed to use a condom or not, based on some fairly unreliable indicators. Almost all katoey reported little or no use of condoms for oral sex, a practice that is likely to lead to increased STIs and eventually more HIV.

Among the sample of 80 katoey, three reported they were HIV positive and others spoke of the way HIV-positive people were treated at hospitals.

*Sometime the condom broke [but] we don't know that it happened. When I could hear it break, I took my penis out. [I] don't want sex any more. But now I am getting old. And my body is not good for it. I went to take a blood test. I was shocked when it said in the paper that I was positive. I said to the doctor [that] I didn't have sex with somebody. But I have to believe the doctor. I went to check in April 2005; in December 2004, I have parotitis. I went to the doctor, he said I have HIV. Now I take Savior, or Vivior...I can't remember the name. At first I had 108*

*white blood corpuscles. Now my blood corpuscles are higher. I take it easy; take medicine when it is time. I take medicine two or three months already. The doctor bans alcohol; I drink it. He prohibited cigarettes; I smoke. I live a simple life. If I take it seriously, I will suffer. My friends never dislike*

## **Almost all katoey reported little or no use of condoms for oral sex, a practice that is likely to lead to increased STIs and eventually more HIV.**

*me. They often warn me to take medicine, warn me to take care of my health. No one hates me. Sometimes I eat with them, but they say I have to use another spoon to scoop the meal. I use a middle spoon, and then separate myself to eat alone. I'd rather eat alone. But my friends treat me well. Now I am getting fatter. I was 55 kg., but now 60–62 kg. At first, I was really afraid. I went to see the doctor and I had TB [tuberculosis]. The doctor gave me medicine for 6 months. I took it only for 3 months, so I became really sick. The doctor said I have to retake 6 months medication again. Doctor and nurse are alright. They encourage me. They told me to take the medicine on time. It used to be 3 pm. But I always forget. Then he changed it to 5 pm, which I prefer more. I don't think I will have sex with somebody anymore. I have to save myself to live longer. The company will give us the supporting money. The company encourages me. They warn me to exercise, not to smoke, asked me to see the lesson from friends who have HIV too. I told them I don't want to live and be a burden. Living with HIV is not good, but I always take the medicine. (40 years old)*

*I don't go out with customers. I have a boyfriend. We have sex about 15 times within a month, both oral and anal. We don't use a condom all the time. It depends on whether we have a condom at the time or not. I trust him. I have other lovers too. I love falling in love all the time. We usually have anal sex. I would always use a condom, except if it's for a long relationship. I usually*

*go to the government hospital or clinics. They were fine with me, no hassles. I had a blood test last month and it's positive. (19 years old)*

*I know from my experience when I had to take care of a sick boy. He died because of HIV. When he was sick, he went to a hospital in Phuket, and they treated him badly. They treated him like a sick dog, not a human being. The place they arranged for the HIV patients was very bad and dirty. I don't understand why they didn't take good care of the patients. We called this hospital "the animal killing field." Sometimes they didn't know whether the boy had HIV, maybe he was just sick, but they let him die because he was gay or katoey. Moreover, they also indicated that he died because of HIV. (35 years old)*

## NEEDS AND SELF-DETERMINATION

There is a broad range of gender presentations that self-defined katoey express, and these may change at different times in his life. Setting up policies specifically for katoey would probably never satisfy all katoey. Yet it is important that they are not discriminated against and stigmatized and that their rights as citizens are not ignored. For this purpose, katoey in Thailand need a voice, a mechanism through which they can discuss their own needs, help each other, and find the means to influence those who do discriminate against them. For this they need allies, organizational development skills, and funding.

*I dream of having an ordinary life like other people. Even if I am a katoey, I still want to make my parents proud. No matter how other people look at me, I yearn for a better life. (23-year-old sex worker)*

*I will perform the show until I can't do it anymore. I will do it until I have enough money to buy or to build a new house for my mother. I give her the money every 4 days, 4,000 baht per 4 days. Sometimes I give her 20,000 or 30,000 baht when I go back home. No, I don't want to do anything else. This is what I wanted to be. I'm proud of myself. (21 years old)*

*I would like to have a katoey organization in Thailand. It would be great if we had our own organization to help the poor or the infected katoey that have no money. This organization should give knowledge or advice to katoey for using condoms and protecting themselves from HIV. We should teach them from the time they are young for their better understanding. Actually, HIV is a virus like a cold or a flu. It is a system of nature to limit the amount of citizens on earth. Well, on the other hand, being katoey may be another controlling mechanism of the earth to reduce the population. We didn't choose to be or not to be katoey, but we are katoey. (21 years old)*

*I would like to mention the title in front of our name—that we should be allowed to change from Mr. to Miss after a sex-change operation. I've heard in China they are allowed to do that. Also a marriage license and career. I would like [people] to see us as another gender. (26 years old)*

*I'd love to see katoey be able to live in the society equally, be able to work an official career such as teacher. Our country doesn't allow katoey to do that which is within our rights to do. There are only several careers we can do, a beautician, a hairdresser, a performer, and sex seller, that's all. I know there is a katoey boxer, but people see it as a strange thing. I would like them to see that it could be common, with no prohibitions. It is better to concentrate on people's capabilities than their gender. (30 years old)*

# DISCUSSION AND RECOMMENDATIONS

This study reveals a set of issues broadly revolving around policy and programs that affect the katoey of Thailand. While much has been written on the history and interpretation of the katoey role in Thai history and culture (Jackson, 1996, 1998 and 2003; Matzner, 2002a and 2002b) and, more recently, on the lives of katoey (Totman, 2003), little has been directed to addressing the immediate needs of katoey in the context of the HIV epidemic or the factors that produce vulnerability to HIV infection.

## POLICY ISSUES

Section 30 of the 1997 Thai constitution reads, in part, “All persons are equal before the law and shall enjoy equal protection under the law. Men and women shall enjoy equal rights. Unjust discrimination against a person on the grounds of the difference in origin, race, language, sex, age, physical or health condition, [or] personal status ... shall not be permitted...” While there are no laws against either male-to-male sex or living one’s life as katoey, the Thai legal system presents numerous problems for a transgendered person.

## EMPLOYMENT

By far the most damaging discrimination against katoey is in the realm of employment. Katoey are rejected repeatedly for jobs, whether qualified or not, a fate that leads to an attitude among many that there is no use in studying. Many have trouble when they do obtain regular jobs due to discrimination against gender variance. Repeatedly, they reported that dressing like a man means more money, but this is extremely uncomfortable for many katoey. They are pushed into entertainment, bar work, dancing, and cabaret work. At the upscale cabarets, salary

and benefits are quite reasonable, and those who really love dancing or were trained as dancers and performers are happy and feel rewarded in their work. The range is wide, however, and many make very little money, are without any benefits, and must supplement their income with sex work. For other katoey, the best economic opportunity they can find is sex work.

**Katoey are rejected repeatedly for jobs, whether qualified or not, a fate that leads to an attitude among many that there is no use in studying.**

In 2002, a survey was conducted in Pattaya of a random sample of 1,490 people on the “Rights and Role of Transvestites and Social Acceptance.” The poll showed 77 percent agreed that katoey should be legally protected when raped and 50.5 percent felt katoey should have the right to a marriage registration, but 62 percent said they shouldn’t be permitted to take up ministerial posts or become national politicians, 71 percent said they should not be allowed to use Ms. or Mrs. in front of their names, and 64 percent said they should not use female toilets. A full 94 percent said they accepted their role in show business and that some could become doctors, lecturers, executives, and nurses (Pattaya Mail, 2002).

While Thai social and cultural values permit a degree of tolerance for homosexually oriented males, both within families and in school settings, they constrict many young adult transgendered males into a stigmatized female role. Sex work naturally accompanies theater and entertainment in most countries, but Thailand stands out for its widely publicized sex tourism and a recent apparent growth in the male and transgender sex trade. In Pattaya alone, there are three

large cabarets (Alcazar, Simon, and Tiffany Show) at which approximately 800 to 1,000 katoey performers work. Katoey also work at most smaller bars and clubs (both boy bars and girl bars) as well as on the streets and beachfront.

### **...the Thai legal system contends that sex is determined by chromosomes and cannot be changed later in life.**

Despite this tourism component, the larger part of the sex trade in Thailand is by and for Thai. As reported in a recent study of methamphetamine or opiate-using MSM in northern Thailand, 89.4 percent stated they had had sex with a katoey partner (Beyrer et al., 2005). In another recent study of the tourist sex trade in Phuket, most clients of katoey sex workers considered themselves heterosexual (Gallagher, 2005), as is likely among most Thai clients as well. It is often reported that male clients of transgenders consider the act a heterosexual one, as most of these men are not ordinarily attracted to gender normative males. While these distinctions and their implications for identity are of greater importance to western men than to Thai men, for katoey, the public sexual role is a feminine one, even if behind closed doors she becomes the insertive partner. In fact, the social construction of katoey reiterates and reinforces the standard bipolar gender categories that devalue females, a further difficulty for the katoey who wishes to be an engineer, architect, or monk. It is significant that, according to Theravada Buddhism, neither women nor katoey are deemed capable of attaining enlightenment in their lifetimes. This can only be achieved by men.

#### **RAPE AND VIOLENCE**

Rape laws comprise an area of grievous discrimination. It is widely recognized that laws against rape of adults and sexual abuse of children should make no distinctions as to the gender or biological sex of the person. Rape and sexual coercion are serious problems in Thailand, yet appear to be non-issues to both the public and

the politicians. In one study in northern Thailand, 26 percent of homosexual/bisexual males reported having been coerced into sex (compared to only 4.6% of heterosexual males). Homosexual/bisexual females also reported coercive sex—32 percent vs. 19.6 percent of heterosexual females (van Griensven et al., 2004). These figures suggest that persons with any signs of variance in gender or sexual orientation are differentially targeted for forced sex. While the non-confrontational nature of Thai society may publicly tolerate gender diversity, these data imply that forced gender conformity may be acted out in other ways. The many aspects of this problem deserve more detailed research and both legal and programmatic investment.

Harassment and violence enacted upon katoey, including sexual violence, particularly by police, represents a serious daily problem in the lives of many katoey. In this study 32 percent of all respondents reported having experienced violence, mostly from police. Mere verbal harassment was not included in this count, but many katoey spoke of being harassed and threatened by police, often it seemed, merely to exact a bribe. Of real concern for HIV prevention was the report that some police are using the possession of more than two condoms as evidence of prostitution. Even if this is only a ploy to take money from katoey and does not really lead to a conviction for prostitution, it has serious impact on condom accessibility.

#### **GENDER AND OFFICIALDOM**

Official documents pose other issues of discrimination. Very feminine-looking katoey with “male” written on official documents have problems throughout their lives. Post-operative transsexuals in particular contest this issue, yet the Thai legal system contends that sex is determined by chromosomes and cannot be changed later in life. As the Thai language makes no distinction between gender and sex (phet), the discordance that transgenderism represents simply goes unrecognized.

As in many countries, marriage registration is not an option between same [legal] sex persons. Yet from the survey results reported above, it seems that many persons in Thailand do not object to a katoey marrying a man.

## HIV/STI ISSUES

Almost all katoey in this study understood the basic facts about HIV. Younger katoey seemed to be better educated about HIV and condom use but were not necessarily better condom users than older katoey. Many were quite dependent on testing to ease their minds after unprotected sex (but often went too quickly for the test), for determining if they needed to use condoms with a boyfriend, and (among some sex workers) to tell their clients they were HIV-free. The greatest gaps in condom use almost always occurred within more intimate relationships, which were supposedly based on trust. There were numerous reasons mentioned for not using condoms, including the following:

- I trust my boyfriend
- Not needed with Thais
- Not needed with young people
- Don't need if partner clean and handsome
- Farangs often refuse
- Condoms are too small and break
- One can insist on using condoms but then demand 2,000 baht extra for sex with no condom
- Can't carry more than two condoms due to police threats (Phuket)
- Can't carry condoms or one might not get a customer (Chiang Mai)
- Forget to use when drunk or on sleeping pills
- Don't have condoms available when needed
- Internet dating usually does not take place with condoms
- Broke up with boyfriend and too depressed

Medical services for treatment were generally accessible, but some health workers were quite discriminatory. Prevention programs were non-existent. Katoey have had to learn from other katoey, magazines, newspapers, and whatever pamphlets clinics or hospitals had available. More specific counseling regarding boyfriends, relationships, negotiation and risk, oral sex as an STI risk factor, living with HIV, living with others who have HIV, gender-reassignment surgery, and other issues was simply unavailable. Few katoey who had full surgery mentioned having any post-operative care or counseling. And, importantly, no appropriate drug treatment facilities or programs were available to katoey.



## **EVIDENCE, ORGANIZATION, AND ADVOCACY**

Research will be required on a number of issues in order to have evidence with which to support katoeys' demands for change. For example, how many katoey are there in Thailand? One rough attempt at counting katoey estimated that there were 17,000 in Bangkok and 180,000 in the country as a whole (Winter, 2002b), but valid size estimation studies have yet to be conducted. What proportion has HIV? What are the STI prevalence levels among katoey? What proportion of katoey has had gender reassignment surgery? What are the specific needs of this group, compared to others? Answers to these and other questions would greatly help government medical and legal agencies understand how to respond to katoey needs.

In order for the katoey of Thailand to gain greater public understanding and engage with law- and policymakers to address the issues raised in this study, it will be necessary to form an NGO or some form of self-help organization, perhaps with branches around the country.

Through such an organization, advocacy and information on transgenderism could be disseminated to the public, to the media, and to katoey themselves throughout Thailand. Challenges to specific legal restrictions could be mounted and supported through such an organization and its networks. While allies of katoey can help by producing up-to-date scientific briefings on what is understood about gender development in biological and sociological terms, ultimately katoey will have to speak out for themselves through newsletters, magazines, websites, seminars, meetings, or art and performance events. As in this study, Thailand's katoey will have to speak with their own voices.

## RECOMMENDATIONS

- Fund and facilitate a self-organizing process among katoey so that their voices can be heard regarding their diverse needs
- Review legal aspects of gender change on documents with an aim of equalizing katoey's rights with all others, being careful not to create legalistic encouragement of transsex surgery
- Advocate with human rights lawyers to press for rape law reform
- Develop katoey-specific HIV interventions, including peer treatment educators, with katoey participation
- Address specific factors related to safer sex (e.g., lubricants, oral sex, condom breakage, group sex)
- Improve availability of fully trained and equipped STI services (specifically for katoey, if necessary)
- Work with government departments (such as education), Chambers of Commerce, and other bodies affecting employment policies to advocate for elimination of restrictions on employment
- Educate police; form police liaison committee in Pattaya
- Improve gender and sexuality education in medical and education professional schools
- Use media campaigns to reduce stigma associated with gender variance
- Introduce gender and sexuality education at lower levels of schooling
- Introduce child sexual abuse education for students, teachers, and parents

# REFERENCES

- AAAS. 2005. "Defining Male and Female—Research Casts Further Doubt on Newborn Sex-assignment Surgeries." Available at [www.sciencedaily.com/releases/2005/02/050223144619.htm](http://www.sciencedaily.com/releases/2005/02/050223144619.htm)
- Bernard, E. n.d. "Drug-using MSM and Transgendered Katoey in Thailand Require Culturally Appropriate HIV and Hepatitis C Targeted Prevention." AIDSMap News. Available at [www.aidsmap.com/en/news/d338bf8c-f9e2-4b66-8aca-d2f77e809255.asp](http://www.aidsmap.com/en/news/d338bf8c-f9e2-4b66-8aca-d2f77e809255.asp)
- Beyrer, C., Sripaipan, T., Tovanabutra, S., Jittiwutikarn, J., Suriyanon, V., Vongchak, T., Srirak, N., Kawichai, S., Razak, M.H. and Celentano, D. 2005. "High HIV, Hepatitis C and Sexual Risks among Drug-using Men Who Have Sex with Men in Northern Thailand." *AIDS* 19:1 535–1540.
- Chandeying, V. 2004. "Epidemiology of HIV and Sexually Transmitted Infections in Thailand." *Sexual Health* 1: 209–216.
- Chandeying, V. 2005. "Sexual Health Promotion in Thailand." *Sexual Health* 2: 129–134.
- Dragoncastle. 2005. "Thai Army Opens to Gays, TVs." 11 August. Available at <http://dragoncastle.net/news1.shtml>
- Gallagher, R. 2005. Shifting Markets, Shifting Risks: HIV/AIDS Prevention and the Geographies of Male and Transgender Tourist-orientated Sex Work in Phuket, Thailand." Available at <http://bangkok2005.anu.edu.au/papers/Gallagher.pdf>
- Girault, P., Saidel, T., Song, N., van Wijngaarden, J., Dallabetta, G., Stuer, F., Mills, S., Or, V., Grosjean, P., Glaziou, P. and Pisani, E. 2004. "HIV, STIs, and Sexual Behaviours among Men Who Have Sex with Men in Phnom Penh, Cambodia." *AIDS Education and Prevention* 1(1): 31–44.
- Jackson, P. 1996. "The Persistence of Gender: From Ancient Indian Pandakas to Modern Thai Gay-Quings." *Australian Humanities Review* April. Available at [www.lib.latrobe.edu.au/AHR/archive/Issue-April-1996/Jackson.html](http://www.lib.latrobe.edu.au/AHR/archive/Issue-April-1996/Jackson.html)
- Jackson, P. 1998. "Male Homosexuality and Transgenderism in Thai Buddhist Tradition." In *Queer Dharma: Voice of Gay Buddhists*, edited by W. Leyland. San Francisco: Gay Sunshine Press.
- Jackson, P. 2003. "Performative Genders, Perverse Desires: A Bio-history of Thailand's Same-sex and Transgender Cultures." *Intersections: Gender, History and Culture in the Asian Context* Issue 9 (August).
- Matzner, A. 1999. "In Legal Limbo: Thailand, Transgendered Men, and the Law." . Available at <http://home.att.net/~leela2/inlegallimbo.htm>
- Matzner, A. 2002a. "Transgenderism and Northern Thai Spirit Mediumship." Available at <http://home.att.net/~leela2/mediumship.htm>
- Matzner, A. 2002b. "On the Question of Origins: Katoey and Thai Culture." Available at [http://web.hku.hk/~sjwinter/TransgenderASIA/paper\\_on\\_the\\_question\\_of\\_origins.htm](http://web.hku.hk/~sjwinter/TransgenderASIA/paper_on_the_question_of_origins.htm)



- Murray, S.O. 1999. "Increasingly Gay Self-representations of Male–Male Sexual Experiences in Thailand. Pp. 81–96 in *Lady Boys, Tom Boys, Rent Boys: Male and Female Homosexualities in Contemporary Thailand*, edited by P. Jackson and G. Sullivan. Haworth Press.
- NASP, Bangladesh. 2004. "HIV in Bangladesh: The Present Scenario." Dhaka: Directorate General of Health Services, Ministry of Health and Family Welfare.
- Parivudhiphongs, A. 2005. "Dare to Care." *Bangkok Post* 8 August.
- Pattaya Mail, 2002. "Survey Reveals Most Still Reluctant To See Transvestites Become Ministers." *Pattaya Mail* (49): 6 December.
- Pisani, E., Girault, P., Gultom, M., Dadun, D., Sukartini, N., Kumalawati, J., Jazan, S. and Donegan, E. 2004. "HIV, Syphilis Infection and Sexual Practices among Transgenders, Male Sex Workers and Other Men Who Have Sex with Men in Jakarta, Indonesia." *Sexually Transmitted Infections* 80: 536–540.
- Totman, R. "The Third Sex: Katoey—Thailand's Ladyboys." Chiang Mai: Silkworm Books. 2003.
- van Griensven, F., Kilmarc, P., Jeeyapant, S., Manopaiboon, C., Korattana, S. Jenkins, R., Uthairavot, W., Limpakarnjanarat, K., and Mastro, T. 2004. "The Prevalence of Bisexual and Homosexual Orientation and Related Health Risks among Adolescents in Northern Thailand." *Archives of Sexual Behavior* 33(2): 137–147.
- van Griensven, F. 2005. "Epidemiology of HIV and STI in MSM in the Greater Mekong Region: What Do We Know?" PowerPoint presentation presented at the Regional Consultative Forum in Bangkok, 15–16 August.
- Winter, S. 2002a. "Country Report: Thailand. Available at [http://web.hku.hk/~sjwinter/TransgenderASIA/country\\_report\\_thailands.htm](http://web.hku.hk/~sjwinter/TransgenderASIA/country_report_thailands.htm)
- Winter, S. 2002b. "Research and Discussion Paper: Counting Katoey." Division of Learning, Faculty of Education, University of Hong Kong. Available at [http://web.hku.hk/~sjwinter/TransgenderASIA/paper\\_countin\\_kathoe.htm](http://web.hku.hk/~sjwinter/TransgenderASIA/paper_countin_kathoe.htm)
- Winter, S., and Udomsak, N. 2002. "Male, Female and Transgender: Stereotypes and Self in Thailand." *International Journal of Transgenderism* 6(1): Jan–Mar.



